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NEW YORK STATE MEDICAL CONVENTION AND SMALLPOX.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—I had the good fortune to be in Albany during the first week in February inst., while the State Medical Convention were holding their session in the city ; and, being generally confined to Saratoga during the winter, by ill health, I gladly improved every opportunity I could spare from other business to engage in transactions, and listen to discussions, so instructive. I was agreeably surprised to find a considerable number of honorary members, but after receiving the cordial welcome and kind treatment of the Society, myself as an honorary member, I ceased to wonder that they were there. If I understand correctly, the convention is composed of *one* member from each county, and a few permanent members, which renders it an exceedingly select body. I shall not stop to inquire whether the delegation of two or three members from each county would not stimulate the individuals of the county societies to higher attainments, but shall express my strong assurance to as many of your readers as practise in this State, that, if they *deserve* a cordial treatment and a fraternal interchange of opinions, they will meet them there, and be made at home at once. Men who have assumed the solemn charge of standing between the patient and the grave, and meeting the gratulation or frowns of the patient's friends, cannot fail to be greatly cheered and enlightened by sharing in the discussions of the meeting.

The chair was occupied by Dr. Stevens, of New York, the President of the State Society, who also delivered the annual address on the evening of the 8th, not only to the Convention, but to the members of the Legislature and the citizens.

The manner in which the subjects of debate were treated, was free and fraternal. I heard no long nor ill-natured speech. A very few arose more frequently than was their due, and might have been troubled with a *cacoethes loquendi*. Yet all was harmonious and business-like. There were three topics of particular interest : viz., the adulteration of drugs ; the best method of saving the public from the pernicious evils of quackery ; and the SMALLPOX, including the whole grounds of its present widespread prevalence, as connected with vaccination, and the best means of exterminating the disease.

On the last topic, there were two or three conclusions arrived at, and facts stated, which I thought might be interesting to your readers; and this is my apology for sending an imperfect outline of the proceedings.

1st. *The intensity of the epidemic influence of smallpox.* It is very certain that the medical men of this day have never seen this disease overriding, with such violence as it now does, the barriers, not only of vaccination, but of its own previous ravages in the same constitution. A physician, whose name has unfortunately escaped me, stated that in the county alms-house of which he had charge in the interior of the State, there were five or six Irishmen, whose faces were deeply pitted from the smallpox, who had recently had the same disease severely. Several other facts precisely similar, and of unmistakable proof, were adduced, showing that we must cautiously consider the intensity of the smallpox influence—contagion—power—epidemic constitution—before we throw away our old friend vaccination. If there are localities where smallpox undeniably overrides smallpox, and frequently, what can we expect from our little handmaid, vaccinia? She has proved a noble servant and defence; and, though she has of late failed in many instances to bar out the monster, smallpox, she has done much to mollify the roughness of his attack.

But, 2d, There were abundant proofs that *the vaccine disease cannot be depended on, AT PRESENT, as a defence.* The varioloid, taken more often than otherwise without the least suspicion whence it came, is everywhere. We have had it six times in Saratoga during the last year. A few weeks since, I was in a family in the east part of the village, where the varioloid had gone lightly through five successive portions of the family and connections. All the children but one had just gone through the cowpox successfully, and the whole, parents and children, who were thus protected, were affected by the varioloid precisely as they were wont to be fifteen years ago, when there was no epidemic smallpox. They were scarcely confined to their beds at all. The child which could not be vaccinated had the regular smallpox very severely.

But it is plain that varioloid is not only vastly more prevalent, but more severe, than usual. Dr. Brigham, of Utica, lost a patient in his institution, by varioloid, whose father was a physician, and who, feeling his accustomed reliance on kine pock, could hardly be aroused by Dr. Brigham to a conviction of his daughter's danger. There are deaths enough occurring after indisputable cowpox, to appease the murmurs and queries of friends who may lose relatives by varioloid, and impugn the skill or faithfulness of their family physician. In dismissing this subject of the supposed degeneracy of the vaccine disease as a preventive of smallpox, I would add, that one of the members, a gentleman past middle life, had been practising, say thirty years, with the usual protection of vaccinia, occasionally re-vaccinating himself, until last year, when his vaccination resulted in a genuine and natural cowpox pustule, with the genuine symptoms of the disease. This was more surprising to him, as he had carefully inoculated himself, after his first vaccination, with the matter of smallpox. Several physicians had never seen re-vaccination result in a pustule; but it appears to be now quite common,

and I have myself seen several cases of successful re-vaccination of late. The conversation on this point evidently produced an impression on the convention, that if the physician above mentioned had been called to visit a case of varioloid or smallpox, at the time of his vaccination, he would have found this long-trusted defence, vaccination, to have failed him.

This leads me to my only remaining topic; *that as yet vaccination continues to be the best preventive of varioloid and smallpox, and to be, moreover, of increased necessity during the continuance of this "constitution."* This whole subject was assigned to a committee, to report next year, through their chairman, Dr. Clark, of New York. This gentleman came to the convention thoroughly prepared for this branch of their investigation, and imparted valuable information. A thorough discussion may be expected at his hands. In the mean time, if this epidemic of smallpox does not suddenly terminate, many an anxious practitioner will be asked to protect his families from the dreaded and even fatal varioloid. Nay, he will have to protect himself. What can he do? For myself, I have never doubted the complete immunity from smallpox, resulting from a pustule produced in my arm in 1815. I have, without hesitation, encountered the contagion of variola, on all occasions, and without evil. There were others there in the same condition. But it was quite apparent that they were shaken; and, although we have re-vaccinated ourselves hitherto as a ceremony, I freely acknowledge I shall be guarded, hereafter, with much more care by re-vaccination.

There are two things before the rational inquirer. Either the power of the vaccination is diminished, or the sensibility to the variolous poison is wonderfully augmented—or both. "Don't you think, doctor, that the kine pock has nearly worn out by passing through so many constitutions?" "Why don't you, doctors, resort to the cow, and have as good matter as Jenner did?" We *have* resorted to the cow, and even to the horse's heel; and we could do this much more frequently had not vaccination so diminished smallpox as to defend our animals from its contagion. Is it in the nature of things, if this virus, newly acquired from the cow by inserting smallpox matter under her cuticle, protected the human race as absolutely as in the days of Jenner, that it would not be eagerly sought and widely disseminated?

But, what other contagious disease loses its power by transmission? Does hooping cough, or measles? The venereal disease has been continued for centuries, by inserting a specific virus *under the cuticle*; and, if the treatment were as unskillful as a century since, would its pernicious effects on the constitution be one jot abated? Analogy seems, therefore, to bring but little support to the assertion that the vaccine virus has degenerated. Nor would a careful watching of the progress of the pustule, as contrasted with its progress thirty-five years ago, lead to any different opinion. Nevertheless, as it cannot be demonstrated that there *is* such a vastly-increased impressibility by the smallpox, the profession seem called upon most loudly to endeavor, by every means, to obtain, either from the horse or cow, a newly-constituted virus which may resist *all* constitutions of the atmosphere and render us safe henceforward.

Re-vaccination, then, *as yet*, contains all our means for securing ourselves and friends. But the facts developed that day, demand much more frequent repetition of the process. If I did not misunderstand Dr. Brigham, he had insane patients who took vaccination over and over, and that something like twenty had taken it several times. When the susceptibility to the vaccine virus ceased, he thought he had established a complete immunity from smallpox. Other statements pointed in the same direction; and from the certainty that re-vaccination is vastly more easily effected than formerly, it seems the imperative duty of every honest and faithful practitioner, at least while this epidemic susceptibility remains, to redouble his diligence in re-vaccinating his patients.

Saratoga Springs, Feb. 26, 1849.

I remain truly yours,

M. L. NORTH.

CASE OF UTERINE HEMORRHAGE—PLACENTA PRÆVIA.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—The following case has been to me one of deep interest, and is thought by some, to whom I have communicated the facts, to be worthy of publication. If you should so consider it, it is at your disposal.

JOSEPH B. WALKER.

East Slough, March, 1849.

August 10th, 9 o'clock, A. M., I was requested to visit Mrs. A., who was considered by her friends very dangerously ill from uterine hemorrhage. It was near the close of the seventh month of her first pregnancy. She was a lady of a healthy constitution, 19 years of age, and to appearance tolerably exempt from hereditary predisposition to disease. It appeared she had received a sudden fright about a month preceding this time, from the explosion of a rock within a few yards of the house in which she was sitting, of which she had not been previously apprised. Whether this had any important influence upon the case, I shall not here attempt to decide. From this time, however, there had been almost constantly a slight hemorrhage from the uterus, though it had not seemed to excite much alarm or attention from the patient or her friends until the morning alluded to. At this time, upon a little extra exertion, there was a sudden and copious discharge of blood from the womb, attended with uterine pains. On learning the facts necessary to be known, I prescribed the most perfect quiet, in the horizontal position, with the head and shoulders low, brandy and water, cloths wet with iced water and vinegar to the vulva, and, as soon as she had rallied a little from the syncope then existing, a powder of opii, sacchar. saturni, ãã gr. j., to be repeated in an hour if hemorrhage continue. She soon recovered her usual health, and in a day or two felt as well as before this attack. Feeling well satisfied myself of the nature of the difficulty, I here stated it to the husband and friends, and represented it as one attended with imminent danger to both mother and infant, and calling for the most prompt attention on the part of the physician and attendants

whenever labor commenced or interference should become necessary. With the exception of a slight return of the hemorrhage at times, her health remained good until October 3d, 2 o'clock, A. M., when I was again requested to see her. I found her lying in a pool of blood, with several thicknesses of clothing about her completely saturated with the same fluid. She was faint, the pulse was scarcely perceptible at the wrist, there was frequent yawning and sighing, and a deathly paleness of the countenance. At this time the os uteri was found dilated a very little, yet hard and unyielding, so that—though not without much difficulty—I succeeded in ascertaining the exact situation of the placenta. It was found with one edge completely covering the mouth of the womb, its body laying to the right and inclining to the sacro-iliac symphysis of that side. I did not consider myself justified, under all the circumstances, in making a forcible entrance of the hand within the cavity of the womb for the purpose of turning. From the best information I was able to obtain, I was led to believe the child had been dead several hours before my arrival. I accordingly prescribed perfect quiet, with the head low, brandy, chicken broth, elixir vitriol, &c., as circumstances might require.

3 o'clock, P. M.—There has been improvement in appearance. Pulse stronger and more regular. Hemorrhage slight. Pains continue, though weak and at longer intervals. Continue treatment. 10 o'clock, P. M.—More hemorrhage than at last visit. Os uteri in much the same condition as twelve hours previous. Continue treatment, with the addition of powder of opii, sacchar. saturni, āā gr. j., to be repeated if hemorrhage continues.

Oct. 4th, 7 o'clock, A. M.—Patient has slept some. Pains continue, though weak. Hemorrhage slight. Os uteri dilated so as to admit two fingers. As the dilatation and softening of this organ had progressed for the better during the night, I thought it more proper to defer any operation, but continue treatment as circumstances might require till afternoon, when the state of the os uteri might be such as to admit of the prudent use of ergot.

1 o'clock, P. M.—Summoned in haste by the husband of my patient, who supposed her dying. Alarming prostration. Bed and clothing about drenched in blood. I immediately administered a large dose of ergot in infusion, and proceeded to turn and deliver. The os uteri was dilated to about the size of a half-dollar piece. Having my right hand well oiled, I inserted two fingers, gradually a third, and so on, pushing away the placenta until I grasped the feet and slowly delivered the child (a male), which had been dead from thirty-six to forty-eight hours. The placenta was taken without difficulty, and a good contraction of the uterus succeeded, so that the hemorrhage ceased. But nature had been tasked to her utmost. For more than fourteen hours I was by the side of my patient without intermission, and during a large portion of that time hardly doubting every breath she drew would be her last.

I cannot here refrain from expressing my unshaken confidence in the secale cornutum under circumstances like these. For me to have administered it earlier in this case, while the cervix and os uteri were rigid

and undilatable without the exercise of great force, would have endangered a laceration of the womb. "To everything there is a season, and a time to every purpose under the heaven," and it was evident to me that the proper time, and the only proper time for the use of this drug, in this case, had then arrived. I think the ergot should always be in readiness in these cases, and administered as early as the state of the parts will admit of it.

Under the cautious and continued use of hot brandy and water, ammonia, wine, broths, bottles of hot water under the axilla and to the feet, &c., the patient gradually revived, to the no small gratification, and even astonishment, of her friends and others who saw her at that time. She was put upon a light and nutritious diet, tonics—as sulph. quinine, elixir vitriol, the preparations of iron, barks and wine, &c., which were administered as liberally as she would bear. Her convalescence has been gradual, yet uninterrupted, and her health is now fully restored to its wonted vigor.

THE MEDICAL SOCIETY OF CONNECTICUT.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The question of amending the plan of organization of the Medical Society of Connecticut, having been agitated to some extent by the physicians of the State, and much interest being felt in the subject by many of them at the present time, I respectfully ask a place in your Journal, which has a large circulation among us, for a few facts and remarks relating to it.

The change or amendment referred to, is this:—that the tax annually paid by members of the Society be appropriated to the publication of a volume each year, in some department of practical medicine or surgery, under the direction of a committee appointed for that purpose, equivalent in value to the tax imposed, and that a copy of it be placed in the hands of each tax-paying member; the fellows paying the expenses incident to their attendance upon convention. The desire for this modification, which has now become strong and earnest in many parts of the State, originated in the conviction of members that they were receiving nothing of appreciable value for the taxes which they were annually called upon to pay, nor any indirect benefits commensurate with those which a State organization, suitably constructed, ought to afford.

It is known to all that the money raised is expended, first, in the payment of the debentures of those who receive the appointment of fellows; and, second, in furnishing to each member of the Society a copy of the proceedings, together with the annual address, the whole making a pamphlet of from thirty-five to fifty pages. These may be regarded by some as entitled to the appellation of benefits; we will not, however, dispute about names, but permit every one to place upon them the estimate which in his opinion they deserve. No legal privileges are extended to its members, who stand, in the eye of the law, on the same level with irregulars of whatever name, and in public estimation enjoy no pre-emi-

nence by virtue of membership. Let us next proceed to show how the appointments above referred to—which constitute the only return which can be claimed by any one as the reward of membership—have been distributed during the last nineteen years.

In Hartford County, between 1828 and 1847, inclusive, the names of 177 physicians appear upon our records. Of these, one attended the State convention 6 times, one 5 times, two 4 times each, five 3 times each, thirteen twice each, forty-three once each. Total, 65.

In New Haven County, the names of 150 physicians appear for the same period. Of these, four attended convention 6 times each, four 5 times each, one 4 times, six 3 times each, nine twice each, twenty-one once each. Total, 45.

In New London County, the names of 110 physicians appear for the like period. Of these, one attended State convention 10 times, three 7 times each, one 6 times, one 5 times, four 4 times each, six 3 times each, five twice each, eighteen once each. Total, 39.

In Fairfield County, the names of 88 physicians appear for the same period. Of these, one attended convention 14 times, two 8 times each, one 7 times, one 6 times, four 5 times each, four 3 times, ten 3 times each, ten once each. Total, 34.

In Windham County, the names of 96 physicians appear for the same period. Of these, one attended State convention 7 times, one 6 times, one 5 times, eight 4 times each, six 3 times each, ten twice each, fifteen once each. Total, 42.

In Litchfield County, the names of 158 physicians appear for the same period. Of these, three have attended State convention 7 times each, three 6 times each, three 4 times each, five 3 times each, six twice each, twenty-six once each. Total, 46.

In Middlesex County, the names of 53 physicians appear. Of these, three have attended State convention 5 times each, two 5 times, four 3 times each, six twice each, fourteen once each. Total, 29.

In Tolland County, the names of 52 physicians appear. Of these, three attended State convention 6 times each, one 5 times, one 4 times, four 3 times each, eight twice each, seven once each. Total, 24.

By examining the above, it will be found that the number of physicians who have practised in the State, and whose names appear upon our published Proceedings during the period specified, is 884. Of these, 154, or 1 in 6 nearly, have received the honor of an appointment as fellows once each; 67, or 1 in 12, twice each; 40, or 1 in 22, three times each; 21, or 1 in 42, four times each; showing the probability of membership for a single session to be but as 1 to 6, while the chances of obtaining the same honor four times are as 42 to 1.

We beg our brethren throughout the State to ponder upon these facts, and to ask, each for himself, by the aid which we think they afford, whether, as a Society, we are pursuing the best possible course; whether it is fair and right to tax, by the twenty years together, a very large majority of members who receive nothing in return; and whether we could not furnish to every member an ample equivalent for his money and all other inconveniences attending an efficient organization—and that, too,

without imposing upon any one a burthen which would be felt—by engrafting upon our existing plan the modification proposed? *Let every member*, wherever his residence may be, whether in the more central portions of the State, where books and periodicals may be readily obtained, both by individuals and associations, or in the more remote sections, where neither can be procured but with increased trouble and expense, inquire further, if it be possible for him to suffer in any considerable degree by the success of our plan; and if not, how it can prove in any respect injurious to our county or State societies. I say suffer, though it may seem a harsh term for the use to which I must here apply it—the only possible mode by which a member may be made to suffer by the adoption of our plan, resulting from his being appointed a fellow; and of escaping this, altogether, as we have shown, his chance is as 6 to 1, and more than 40 to 1 against his receiving the appointment upwards of 4 times during his whole life.

It is believed by some highly-respectable members of the Society that it is now prosperous beyond any similar one; that it is a model of its kind, and worthy of our entire confidence and support. To certain fundamental features of our existing organization, no objection has been made by any one; but that it is deemed perfect, securing the cordial support of its members, let the following fact testify. It will speak for itself to all our members, and particularly to those who have served in the capacity of county clerks, to whom the business of tax gatherers in the several counties is committed. The average annual receipts of the Society for five years, commencing with 1843, was \$296,46; the number of taxable members, during the whole period, being upwards of 350, and the annual tax \$1,50 each.

One other topic it is but just that I briefly consider. It is said that the change proposed is disorganizing in its character—that its effect will be to diminish the number of fellows from distant counties, while those that are nearer will be likely to attend; in consequence of which, the existing ratio of representation will virtually cease, and a central power spring up which will control the affairs of the Society. This, however, is but an opinion, and we may with propriety set it against an opposite opinion equally worthy of belief. The members from this County are as true friends of the Society as those of any other, and would not intentionally do anything which they did not believe would advance its interests. They are, I believe, unanimously in favor of the change proposed. If there is a dissenter he is unknown to the writer of this article. They cordially approve it, because they perceive that by means of it, each tax-paying member of the Society will receive annually in return for his money not only a certain equivalent, but that which can scarcely fail to make him a wiser, and consequently a more useful physician; bind him closer to the Society by the bond of an enlarged interest in it, and through its silent yet potent and prevailing influence, gradually yet surely elevate the character and standing of the profession in fact, as well as in public estimation, throughout the State; and all this, as I have shown, and as any one may learn by reference to the facts which this article contains, without imposing upon a single individual a burthen

worthy of the name. They see nothing disorganizing in a measure which promises so much palpable good at so cheap a rate; which increases much the inducements of such as are already members, to remain so, and offers a tangible and truly valuable reward to those young physicians who are every year establishing themselves among us, and from whom, if at all, our ranks are to be replenished. If we are right in our opinion, and our brethren concur with us, it becomes every member to make it a personal concern to attend the County meetings which are to be holden early in April, and see that the fellows are instructed in regard to this subject, and prepared to act definitely upon it.

Hartford County, March 1st, 1849.

USE OF CHLOROFORM IN ECLAMPSIA.

[THE following cases occurred in the lying-in wards of Bellevue Hospital, New York, and are reported for the Journal by Dr. Henry G. Cox, senior assistant in that Hospital. It is believed that etherization in eclampsia was first successfully employed in the above-named institution. A case by Dr. Metcalf, one of the visiting physicians, occurred in January, 1848, and is mentioned in No. 3, Vol. XXXVIII. of this Journal. This method of treating the disease has been uniformly and successfully adopted there, by Dr. Reese and his assistants, since that time.]

MARY A. THOMPSON, æt. 28, Ireland, married, delivered 12th February, 1849, after a regular labor, of 13 hours' duration, at 12 M., of a healthy girl. This is her second child. She had her first some six years ago, which was after a regular easy labor. Nothing untoward occurred at that time. Six, P. M.—Patient has been very restless, and complains much of after-pains; thinks she will not recover. Gave pulv. Doveri to quiet irritation and induce sleep. Ten, P. M.—Is still uneasy. Complains of after-pains; and as her bowels have not been opened, I gave her hydrarg. submur. gr. x., pulv. opii gr. i. Twelve.—Patient is more quiet—sleeps slightly.

13th.—Eight, A. M. Patient is still in a desponding mood as to her condition. Complains of pain in head and in her bowels. Ordered a full stimulating enema to be given her; after which, her bowels were freely evacuated. Pulse 75, and full—countenance disturbed. Eleven, A. M.—Was suddenly summoned to patient. Found her suffering from genuine eclampsia; face livid and distorted; muscles rigid; pupils first contracted, and afterwards dilated—unaffected then by the light; respiration labored; pulse 70, full and hard; jactitation of body, with moaning. I immediately bound up her right arm, and bled her from a large orifice, while recumbent, 3xxiv. Poured water from a height on her head, and applied counter-irritation by sinapisms to extremities, when she revived, and the convulsions ceased. She then appeared rational. Pulse had risen to 100, and was less full. Had the wet bedclothes removed, and continued the cold applications to head, with the previous treatment to extremities.

In 20 minutes the paroxysms recurred with redoubled and fearful vio-

lence. Respiration more labored and slow than before. Assisted by Dr. Fassitt, I re-opened the vein and bled her $\frac{3}{4}$ xviii., and gave a stimulating enema; when the pulse (which had risen to 120) was fast becoming feeble; countenance blanched, and the convulsions still recurring at intervals of four or five minutes, I decided to give her, by inhalation, chloroform and ether, $\frac{aa}{ss}$ by weight, when in a few seconds she came under the influence of the remedy; the force of the pulse was diminished, and the attack passed off. The paroxysms again recurring, the towel with the chloroform and ether was re-applied, and she immediately became composed and breathed naturally. Dr. Reese having returned to the hospital, was immediately summoned, when he approved of the treatment and directed its continuance. Patient was under the influence of the chloroform for one hour, during which time the violent symptoms recurred, or were in the act of recurring, five times at short intervals; but after the second paroxysm they were easily overcome, and at the end of the hour she sunk into a quiet slumber. One and a half o'clock.—Pupil is affected by the light; pulse feeble, 130; patient still sleeping quietly. Two and a half, P. M.—Found it necessary to stimulate her, as pulse is more feeble, and increases in frequency. Eight, P. M.—Patient has slept quietly at intervals for more than two hours. Ten, P. M.—Being somewhat uneasy, gave tr. opii, gtt. xxx.

Feb. 14th.—Patient slept well, and is comfortable.

15th.—Slept quietly last night; is quite rational; takes milk punch and good diet, and has had no recurrence of convulsions since she first came fully under the influence of the chloroform and ether.

CAROLINE SUNIE, æt. 21, New York (primipara), was taken with labor-pains Tuesday morning, February 6th, about 6, A. M., which were not very severe until the evening. Six, P. M.—Patient now is becoming restless; complains much of pain in her back; os uteri slightly dilated. Nine o'clock.—Pains constant and prostrating; pulse 75; dilatation progressing very slowly; and as patient says she did not sleep last night, and is much exhausted, gave pulv. Dov. gr. xv., hoping to induce sleep. Nine and a half, P. M.—Patient is still very restless, and complains much of her pains. No disposition to sleep. Gave tr. opii, gtt. xiv. Ten and a half.—Does not sleep. Concluded to give her, by inhalation, a mixture of chloroform and ether, which produced almost immediate relief. The uterine contractions continued, but patient was unconscious of the pain. The inhalation of the remedy was not carried to a point to induce sleep, but simply relief from the pains. In a few minutes after each application, however, she sunk into a quiet slumber, which lasted from a quarter to a half hour, when the pain would arouse her, but on a re-application of the towel, she would immediately experience relief. This was continued until 4, A. M., the following morning. Pulse was unaffected by it. After the first drachm had been used, it became more frequent, and then returned to its previous condition.

Feb. 7th, 8 A. M.—Os uteri continued to dilate during the administration of the chloroform and ether; but as patient does not complain as much as she did last night, discontinued the use of the anæsthetic agent. One, P. M.—Pains becoming again severe, and patient crying out much,

I again commenced its administration, exhibiting it until the pains ceased to affect her materially, but not to produce sleep, although she again slept as last night at intervals. Os uteri dilated about the size of a fifty-cent piece. Five, P. M.—Have again suspended the use of the chloroform to observe if the pains are more effectual without it, but do not find that they are. Six o'clock.—Resumed it. Os is well dilated; but as the pains are very inefficient, I gave $\frac{3}{4}$ ss. tr. secal. cornut. Eight, P. M.—The labor is progressing very favorably; pains are of a more expulsive character, and although patient is quite conscious, she seems to be insensible to the pains in a great degree. The head at this time passing through the soft parts, she does not exhibit any of the symptoms of severe suffering always evident at this juncture, and after the termination of the labor expressed herself as having felt little or but slight pain. She gave birth to a fine healthy boy. In half an hour the secundines were expelled, and the uterus contracted well.

More than $\frac{3}{4}$ ij. of the mixture of equal parts by weight of chloroform and ether were used in this case. The only abnormal condition of the patient during the whole period (which was at least six hours) that she was under the influence of the remedy, was, that for a few minutes she would speak idly of events that had transpired at a previous time, but which lasted only a few minutes. She asked ardently for it throughout, after its first exhibition; complained of no pain whatever, in head or elsewhere, but earnestly begged, when she felt the approach of uterine pain, that it might be given.

After the labor had ended, she complained of a light and dizzy feeling in her head, as if the room were turning, but she soon relapsed into a quiet slumber, which lasted for an hour. I then gave an anodyne, after which she slept quietly until the morning, and awoke refreshed.

8th, 7½ A. M.—Patient is as comfortable as usual; skin moist; pulse 90; tongue soft; no pain in head; feels slightly sick at her stomach, which is relieved by lime-water.

HON. T. O. EDWARDS, M.D., OF OHIO.

[Communicated for the Boston Medical and Surgical Journal.]

If one member of Congress more than another deserves a commendable notice, as he retires from his seat in the House of Representatives of the United States, that man is the gentleman whose name heads this article.

Dr. Edwards retires from the halls of Congress to resume the practice of his arduous profession, which he left with great reluctance, and to benefit which he has devoted a great portion of time and no ordinary talents. Most of your readers are well aware that Dr. Edwards brought forward and carried through Congress, "An Act to prevent the Importation of adulterated and spurious Drugs and Medicines;" but none of them can fully realize the benefits that must arise from it, unless he be a physician practising in the western or southern portions of our Union. Our nation had in fact become the receptacle for the adulterated and de-

teriorated drugs, medicines, chemicals, and other medicinal preparations, of all nations, when Dr. Edwards brought forward what is now the Drug Law. The passage of that law is the beginning of a reformation in the quality of our medicines and medicinal preparations. A better man could not well have been found in the ranks of the profession for this purpose. Fearless, independent and just, in the discharge of his duty, he was one of the too few members of Congress who might always be found at his post. He has raised the outer bulwarks of our defences; it now remains for the profession, and all others who feel an interest in the subject, to cause laws to be enacted by each State, prohibiting the sale of adulterated and spurious medicines and medicinal preparations. During the greater part of the month of November last, Dr. Edwards was visiting the ports of Boston, New York, Philadelphia and Baltimore, at the earnest request of the Secretary of the Treasury (although at a sacrifice of pecuniary profit and personal comforts), for the purpose of examination, and to inquire whether the Drug Law was properly carried into effect. His able report upon this subject was laid before Congress by the Secretary of the Treasury on the 22d of January last. He found that the instructions of the Treasury Department had been fully carried out by the examiners at the various ports, whom he found to be "good selections, diligent, faithful and capable;" and after conversing "with a number of the importers of drugs in the various cities, and especially New York, whence came most of the opposition," he says, "I am confident in the assertion that the early prejudices are not only rapidly passing away, but that all are now inclined to view the law with sentiments differing widely from those entertained at its introduction. A very limited number now advocate that freedom of trade, which gives to the designing and dishonest drug dealer power not only over the health but the lives of the community. Strongly impressed as were the friends of the bill of its ultimate success, and that an enlightened public opinion would sustain and foster it, as beneficial to the physical well-being of society, we were not prepared for so full an expression of its benefits, and miscalculated its strength of confidence in all classes of the community. I have received over six hundred letters from physicians, in all parts of the Union, commending in the highest terms the action of Congress on this subject. National and State medical societies, medical professors and classes, have passed resolutions in its favor. All the Medical Journals of the United States, and numerous foreign periodicals, have published the law and the report of the committee entire."

I feel that Dr. Edwards needs no praises at my hands; his works praise him; and although his course has been short in the national councils, it has been fruitful in good works. In retiring to his profession, he retires, while yet young, full of honors—honors conferred by his professional brethren, feeling that to such as he honor is due. May his health long allow his talents to adorn his profession.

SOLA NOBILITAT VERTUS.

REPORT OF A FATAL CASE OF RHEUMATISM AND PERICARDITIS.

BY G. C. ARMSTRONG, M.D., WARE.

THE following brief case of acute rheumatism shows the insidious nature of pericarditis. Samuel T——, a hay-binder, aged 42, was taken ill on the 10th of November, and I was requested to see him, being in the house at the time in attendance on his wife. He had the symptoms of a slight febrile attack; in addition to which he complained of a pain in the right pectoral region. He informed me that some short time before he had had a hurt from a ladder, but that he did not think much of it at the time. I examined the part, and although there was considerable tenderness to the touch, I could not perceive any tumor or ecchymosis. I prescribed a mercurial purgative; a mixture, containing solution of acetate of ammonia and camphor mixture in equal parts, to be taken every third hour; and a liniment to be rubbed over the seat of the injury.

November 11th.—His bowels had been freely moved, and his tongue was cleaner; skin moist; urine high colored. To repeat the mixture.

12th.—Having business in another direction, my partner visited T——, and found his right knee swollen and painful; fever increased, but no difficulty of breathing or pain in the chest; pulse 90, compressible, and without intermission; urine very much loaded. He had passed a bad night, owing to the pain of his knee. Ordered a mixture of wine of seeds of colchicum, carbonate of magnesia, tincture of hyoscyamus, and camphor mixture, to be taken every third hour, and ten grains of Dover's powder at night. The painful joint was also directed to be enveloped in wool, and covered with flannel.

13th.—The swelling has completely left his knee, and settled in the elbow-joint of the same side; he has had a bad night; in other respects as before; pulse 95, but regular. To continue the mixture and the anodyne at night.

14th.—Has had his bowels moved freely; feels rather more comfortable, and has had some sleep. The wrist and ankle of the same side have now become affected; the swelling of the elbow has subsided; pulse 95, and regular; urine very much loaded; in other respects as before. To continue the medicines.

15th.—A messenger came to say that T—— had died at 3 o'clock this morning. A change had come on for the worse about midnight; he complained of his chest, and had much difficulty of breathing and some wandering, although he was tolerably collected when spoken to.

After some difficulty, we had permission to make a *post-mortem* examination. On dissecting away the integuments and great pectoral muscle from the right side, we came upon a collection of purulent matter in the lesser pectoral muscle not communicating with the ribs or intercostal muscles. On opening the cavity of the thorax, and slitting the pericardium, we found six ounces of reddish fluid. The membrane itself was less altered in appearance than might have been expected from the quantity of fluid effused. The heart appeared healthy, but we had no

opportunity to examine further, and indeed we found quite sufficient to account for death in the pericardium, without making further search.

This case is, I think, rather interesting, from the very rapid termination of the disease after the first appreciable symptoms of pericarditis were manifested. Although acute rheumatism is frequently complicated by pericarditis, I would ask if it was likely in this case to have been influenced by the injury sustained from the ladder?—*London Lancet*.

CASE OF TRAUMATIC TETANUS.

BY D. W. BRICKELL, M.D., OF THE CHARITY HOSPITAL, NEW ORLEANS.

MARCH 16th, 1848.—Albert Fisher, German, aged 20 years, quite robust, proprietor of a "coffee house" in the 3d Municipality, entered ward 11, Charity Hospital. Says he ran a nail into the external portion of his right foot, near the junction of the "metatarsal" and first phalangeal bones of the "little toe," about five weeks ago; that the wound caused him considerable pain at the time, but soon healed without any difficulty; that at the expiration of three weeks from the time of the reception of the injury he was seized with violent tetanic spasms, together with slight pain in the original seat of injury; that, on the following day, a physician laid open the old cicatrix, and extracted a portion of the nail which had been imbedded there during all this time; that the spasms were now somewhat mitigated, but he was confined to his bed with constant rigidity of the back, jaws, and hip-joints, together with frequent lancinating pains in the lumbar region.

In this condition I find him this morning. He complains bitterly of insomnia, begs to have something which will induce sleep, every three or four hours he has an aggravation of the symptoms amounting to almost complete "opisthotonos," appetite good, bowels in good condition, perhaps a little torpid, skin perfectly natural, countenance wearing the distressed air so peculiar to these cases; complains much of the lancinating pains in his back, says they recur every three minutes.

"Treat."—Ol. ricin. $f\frac{3}{4}$ j.; tinct. opii, gtt. xxx., every hour, after the free operation of the oil, until sleep is induced; low diet. Emplast. vesicat. to back.

17th.—Says he feels better, but is drowsy and dull; oil operated freely. Commenced taking laudanum at 12 M. yesterday, and repeated, as ordered, every hour until 12 at night, when he fell asleep and slept soundly until 6 this morning; pain in back not so intense, rigidity the same.

"Treat."—Moderate dose of magnesia and rhubarb, tinct. opii, gtt. lx., to be taken at 8, P. M. Half diet.

18th.—Not so well, slept very little last night, complains of the stupefying effects of the laudanum, pain in the back returned.

"Treat."—I now resolved to try the *internal* administration of chloroform, and ordered, accordingly, gtt. xxx. to be given at once in one ounce of mucilage, and to be repeated every two hours, with gtt. x. additional at each dose, until sleep is induced; blister, also, to be re-applied, it having taken but slight effect before.

19th.—Took four doses of chloroform, as ordered, and fell asleep about an hour after the first dose, slept soundly until 1 o'clock this morning; says he thinks he would have slept before, but for the irritation kept up by the blister; looks bright, feels much refreshed, back much relaxed, hip-joints nearly entirely so, no unpleasant result from taking the chloroform.

"Treat."—Chloroform repeated as before, beginning with gtts. lx. Half diet.

20th.—Slept several hours yesterday, and soundly all night; feels much better, rigidity almost the same.

"Treat."—Chloroform, gtts. c. at night, rhubarb and magnesia.

21st.—Had several spasms yesterday before taking the chloroform, complains much of the pain consequent, countenance more distressed, had several spasms this morning, rigidity the same.

"Treat."—Chloroform, gtts. c., to be taken at 12 M., and repeated at 4 and 8, P. M., if sleep is not induced.

22d.—Took two doses of chloroform, as directed, and slept from 4½, P. M., to 12 or 1 this morning; spasms quite frequent this morning, and amounting to almost decided "opisthotonos;" was aroused from his sleep by these spasms several times last night, much pain, is evidently growing worse.

"Treat."—Quin. sulph., grs. xxx.; tinct. opii, gtts. lx.; mucil. acac., f 3j. M. S. take at 10, A. M.

5, P. M.—Much better, but four or five spasms during the day, and these much mitigated, pain much relieved, countenance more cheerful, no "tinnitus aurium," or other disagreeable effect from the use of quinine.

"Treat."—Repeated the quinine, &c.

23d.—Very much improved, had but one or two slight spasms since I last saw him, scarcely any pain, slept well last night, is delighted with the remedy.

"Treat."—Same dose as before, to be taken at 10, A. M., and 3 and 9, P. M.

5, P. M.—Has taken two doses as ordered, feels better every hour, spasms scarcely perceptible, no pain, has slept well during the day, no unpleasant symptoms from quinine, feels "a little drunk."

24th.—Still improving, rigidity of back very slight, no pain, slept well all night, looks cheerful.

"Treat."—Same dose quinine at 12 M. and 8 P. M.

25th.—Marked improvement, no more spasms, no pain, rigidity very slight, slept well, looks bright, says he is nearly well.

"Treat."—Same as before.

26th.—Patient is walking about the ward, improving rapidly.

"Treat."—Same continued.

27th.—Suspended the quinine, and ordered good diet, small dose of oil.

30th.—Discharged him, well.—*N. Orleans Med. and Surg. Journal.*

 THE BOSTON MEDICAL AND SURGICAL JOURNAL.

 BOSTON, MARCH 14, 1849.

Constipation.—A failure of the natural action of the bowels in the removal of their contents is a fruitful source of disease. From this arise eruptions of the skin, bad breath, dyspepsia, and a multitude of derangements. This complaint seems to be more prevalent in this country than on the other side of the Atlantic—a fact attributed by our respected fellow townsman, Dr. John C. Warren, to the superior dryness of the atmosphere. The constant occurrence of the difficulty alluded to has led him to try a great number of remedies, suggested by physicians and common experience; cold water on an empty stomach, pure coffee taken under the same circumstances, fruit, dried fruits, cold water injections; and a number of articles of the *materia medica*—magnesia, rhubarb, aloes, &c. All these have had a limited good effect, but have failed in a great number of instances, and could not be brought into general use.

In the year 1825, he first introduced into this place bread made of unbolted wheat flour, variously denominated as brown bread, dyspepsia bread, &c. The good effects of this article have been extended to thousands, and even, perhaps, to hundreds of thousands of persons; but it fails in many cases, owing to the patient being unable or unwilling to take a sufficient quantity.

In February, 1847, while conversing with a patient grievously troubled, it occurred to him that, as the coarse wheat bread produced its laxative effect by the action of its unassimilated portion, the bran, a coarser bran might have a greater effect and remedy the constricted state of the bowels which the bread had failed to do. He selected some of the best wheat, had it coarsely ground in a coffee mill, boiled slowly for three or four hours to the consistence of hominy, rice or hasty pudding, and found, to his great satisfaction, that this article, eaten with a little salt and butter, or cream, or brown sugar, or molasses, answered more uniformly than any other substance. Since its introduction, this has been employed by a vast number of persons in Boston, in the northern division of this country, and in many other places, with excellent effect. It is eaten at breakfast or dinner, in a quantity varying according to the constitution of the individual; but, as a general rule, from eight to twelve ounces, or two tea cups, will answer the purpose.

The principle on which this substance produces its action we do not intend to discuss here, but, as we have heard these remarks from Dr. Warren himself, we can vouch for the accuracy of the above statement; and, having made trial of the "cracked wheat," or "wheat hominy," we can testify to its valuable properties from our own experience. This preparation he does not offer as a new invention, as it has been employed for various uses; but it is remarkable that the attention of physicians and others has not been distinctly directed to it by any one, as the best dietetic remedy for costiveness. Perhaps it has been thought too common a thing to be brought before the public in a formal manner; but if it attains so very desirable an object as it is believed to do, its simplicity ought not to constitute an objection to doing so. That it does this generally, there is no

doubt, although it ought not to be considered as a panacea, adapted to cure every one, since there are persons with whom it does not agree, and to whom, therefore, its benefits are not available. The medicinal efficacy of the preparation is proportioned to its coarseness and to the shortness of the time it is boiled; but to render it palatable, it should be about as coarse as rice or hominy, and should be boiled from thirty minutes to four hours, a little salt being added at the close of boiling. Being acceptable to most persons as an article of food, it is kept for sale by the grocers of Boston.

Water injured by Copper Stop-cocks.—For a while, certain gentlemen attempted to frighten our citizens out of the notion of using lead service pipes, from the street mains, to conduct the water into their houses. That has passed away, without any one, to our knowledge, being injured by an aqueous solution of lead; but there is an evil existing in connection with the public water works, that may by-and-by produce some apprehension. We allude to the thousands of copper, or rather composition, stop-cocks, and copper connections between the great iron logs and the leaden branches. If copper, untinned, is ever prejudicial to health, the enormous surface of the article thus standing perpetually in contact with the water in the city works, must impart a destructive property to it. Those who have been at an extra expense for iron service tubes, still retaining the copper connection nuts, have gained nothing whatever.

Morbid Sensibility of the Retina.—Our neighbor, John H. Dix, M.D., an oculist of growing reputation, was the successful competitor for the Boylston Medical Prize Question of 1848—viz., "What is the nature and best mode of treatment of that affection of the eyes commonly called morbid sensibility of the retina?" Dr. Dix is not only very familiar with the diseases to which the visual organs are incident, but one of the best practical writers in New England in that department of medicine. Messrs. Ticknor & Co. have brought out the dissertation in a compact 12mo. of 140 pages, under the title—"Treatise upon the Nature and Treatment of Morbid Sensibility of the Retina, or Weakness of Sight." This complaint, here, may be said to be among the intellectual classes of society; and it is therefore the more singular that we have hitherto had so little knowledge in regard to its best treatment. There are four natural divisions in this work, embracing all that is essential for the practitioner to study in relation to the treatment of the malady in question. 1st. Symptoms and diagnosis of morbid sensibility of the retina. 2d. Location and nature. 3d. Causes. 4th. Treatment.

By this treatise we learn that females are more liable to it than the other sex; and furthermore, that soon after puberty, the adjusting power of the eyes is most liable to be deranged, occasioning a shortening of the focal distance. Occupation, recent prostrating diseases, excesses of various kinds, scrofulous habits, disordered menstruation, congestion of vessels, headache, &c., are enumerated among the causes of weakness of sight. Then, again, there are certain congenital predispositions to an irritable condition of the retina—such, for example, as the color of the iris. Those in whom it is of a dark-brown or hazel, are more susceptible of morbid sensibility than those of a lighter color. The uncommon largeness of the pupil, muscæ, inflammatory affections of the eye or its appendages,

and excessive and ill-regulated use and exposure of the eyes, are noted as prominent causes. These should not be overlooked in conducting an inquiry into the origin of the painful malady, for which this small but well-digested book proposes remedies, founded on a series of philosophical investigations.

Boston has several eminent oculists. The infirmary for the treatment of the diseases of the eye and ear has unquestionably paved the way for the distinction some of them enjoy. The successful results of Dr. Dix's practice, embodied in the present dissertation, exhibit the fruits of close application and experience. Fully recognizing this as a valuable contribution to the medical literature of the day—much needed, too, by physicians, it is recommended to them with full confidence that they will not be disappointed in the representations of the friends of Dr. Dix.

Congressional Report on the Discovery of Etherization.—A public document of 46 octavo pages—being a report of a Committee of the House of Representatives, of which Dr. Edwards, of Ohio, was Chairman—shows that it is still quite impossible to reconcile the claims of the alleged discoverers of etherization. The fact is, both parties have their strong personal friends, their hired attorneys, and being determined upon victory, the question will probably long continue to be agitated. A thousand reports will scarcely alter the condition of things, however favorable they may be to either. Both have labored incessantly, but thus far neither have received from the nations addressed by them, any substantial evidences of merit, beyond reports and honors. But "will honor set a broken leg?" Will it pay the expenses of printing, memorializing and travelling? We are assured by Dr. Jackson that another report will shortly appear, of an entirely different character from the one before us.

Meeting of the American Medical Association.—At what place will the delegates assemble in Boston? This question is frequently asked. If the Natural History Rooms, Mason street, will not answer, the Tremont Temple or the Lowell Institute are the most suitable in point of locality. Why not ask the Legislature for the use of the Representatives' Hall? Now is the time to do it—and it is certain that it would be admirable above all other places. At the close of the session a great dinner should be given in Faneuil Hall.

Philadelphia College of Medicine.—At the commencement of the Philadelphia College of Medicine, held on March 6th, 1849, the degree of Doctor of Medicine was conferred upon Rufus I. Kittredge, N. H.; Wm. J. Bowdoin, Virg.; Jno. H. Potter, N. Y.; Stephen Parsons, Geo.; Jas. E. Barker, S. C.; S. P. Benny, Md.; Dwight Ruggles, Mass.; L. W. Leighton, N. H.; John C. Wall, Philad.; John H. Tucker, S. C.; F. W. Danowsky, Penn.; N. R. Mosely, Philad.; Jas. C. Hathaway, British Prov., America; Walker B. Samuel, S. C.; Wm. G. Myers, Penn.; Wm. M. Neyland, La.; G. H. Ordell, N. H.; M. A. Dumey, Penn.; W. J. A. Biskey, Jr., Philad.; Jno. J. Steele, S. C.; Geo. Watt, Philad. The honorary degree upon W. L. Richardson and Ira Warren, Boston; J. Goston, Penn. The ad eundem degree upon Elton R. Smilie, M.D., Boston; H. L. Byrd, M.D., S. C.

Obstetrics—the Science and the Art.—We are delighted to hear again so soon from the accomplished Professor of the Jefferson Medical School. A few months only have elapsed since Dr. Meigs presented the profession with a valuable treatise on the "Diseases of Females," and yet, in addition to his arduous labors, he has succeeded in completing the volume before us—not, however, we regret to learn from his introductory letter, without seriously injuring his health. Elsewhere we shall look for an elaborate review of his work—we refer to it now merely to welcome its appearance, and to assure the student, who may be about to purchase a system of midwifery, that we are acquainted with none of greater practical value.

D. H. S.

Mortality of the City.—The mortality in Boston the last week, it will be seen by the report, was remarkable for the season of the year—indeed, we believe it has not been exceeded in any season except the fall of 1847, when the weekly number of deaths, three times in September, exceeded that of last week. In the corresponding week of last March, the number was less than half the present number, and the average for the corresponding weeks of the last five years is only 42—being a fraction over one third of last week. The weekly average for the whole month of March, during the last five years, is 44; and that for the year 1848, 55. This increase has been partly caused by the extensive prevalence of measles at the present time. During the month of March, last year, there is not a single death recorded by that disease. Scarlet fever has also been much more prevalent this year than last, and has helped much to make up the great mortality in question. The weather has not been such during the month as is usually considered unfavorable to health, but was preceded by an unusual degree of cold, which may have contributed, in part, to the production of so great an amount of sickness.

Medical Miscellany.—A committee of Congress have recommended that \$20,000 should be allowed Dr. Paige, of Washington, to complete his efforts to propel heavy machinery, boats, railroad cars, &c., by electro-magnetism.—Dr. Winslow Lewis, of Boston, an eminent surgeon, will go to Europe in the next steamer, for the benefit of his health, now much impaired.—Measles still prevail hereabouts, very extensively.—Cholera begins to re-appear at the places where it has heretofore existed, both in Europe and the United States.—Dr. Morton, of Boston, has received the degree of M.D. from the Washington University, Baltimore.—The subject of the burial of the dead in the populated parts of the city, is beginning to excite attention in Philadelphia. Why are not the citizens of Boston more alarmed at the vast accumulations in the cemeteries in the very heart of the city?—Dr. Hardenbrock, of Rochester, N. Y., has been discharged, having been accused of poisoning a woman.

TO CORRESPONDENTS.—A paper on the subject of a new Hospital for the Insane in Massachusetts, and one on Cod-liver Oil, have been received, and will appear next week.—The article on "Ideology," acknowledged a week or two since, is considered unsuitable for the pages of the Journal.—Several Reports of Lunatic Asylums have been received, and notices of them are crowded out of this number of the Journal.

DIED.—At Belleville, Ill., John E. Abbott, M.D., formerly of Portsmouth, N. H.

Report of Deaths in Boston—for the week ending March 10th, 122.—Males, 55—females, 67.—Of consumption, 16—scarlet fever, 13—brain fever, 2—lung fever, 9—pleurisy fever, 2—measles, 18—dropsy, 4—dropsy on the brain, 4—teething, 3—croup, 2—hooping cough, 2—child-bed, 4—disease of the heart, 2—cholera morbus, 1—paralysis, 1—disease of the spine, 2—erysipelas, 2—convulsions, 4—infantile, 4—palsy, 1—marasmus, 3—dropsy on the chest, 1—tumor, 2—apoplexy, 1—cancer, 1—scrofula, 1—old age, 1—congestion of the brain, 1—disease of the brain, 2—influenza, 1—dysentery, 1—cholera infantum, 1—inflammation of the brain, 1—accidental, 2—worms, 1—typhus fever, 1—debility, 2—inflammation of the bowels, 1—unknown, 1.

Under 5 years, 59—between 5 and 20 years, 19—between 20 and 40 years, 20—between 40 and 60 years, 12—over 60 years, 12.

Dr. Channing's Treatise on Etherization in Childbirth.—The following remarks on a work, in which, as the production of a Boston physician of eminence, and relating to a means of relief which also had its origin here, we feel an interest and a pride, are copied from the New Jersey Medical Reporter, edited by Joseph Parrish, M.D.

"This is a neat volume of 400 pages. We take pleasure in introducing it to our readers, as it appears to us to contain a candid statement of facts, which have been accumulated by its author from various physicians in Boston and elsewhere. The principal objection urged by those who oppose etherization in childbirth, is fairly considered. The *safety* of the practice is established beyond controversy. The special, physical, moral, and intellectual effects are detailed in the report of the several cases; and near the close of the work they are arranged in tabular form, with considerable accuracy. The first table contains the returns of 516 cases; all these are classed under the head of natural labor."

"In all these cases, which embrace the various complications that are constantly occurring in obstetric practice, except such as require manual or instrumental aid, there is not a single one reported in which the mother did not do well. The other tables show the result of experience in fifty-one cases of unnatural, complicated and instrumental labors, embracing those that required the use of forceps, and operations of craniotomy, labors complicated by convulsions, hemorrhage both accidental and unavoidable; twins, and presentations of breech and upper extremity. The analysis of these tables gives four deaths in fifty-one labors; a result, considering the dangerous complications, and the extreme hazard to which the patients are exposed, that is less than might be expected, and it is believed less than would have occurred had not ether been employed: thus proving not only the safety, but the absolute utility of the agent. The physiological, moral, and religious objections, which have been urged against the use of ether, are also fairly considered, and in our opinion fairly answered.

"The application of this remedy of pain, to ordinary diseases accompanied by spasm, is taken up and cases given. It has been used even in phthisis, to relieve the distressing dyspnoea and anguish of the last stages. In tetanus, also, and other spasmodic disorders, in puerperal convulsions, cholera, and typhoid fever accompanied with spasms: these cases are detailed in the Appendix, which constitutes a very valuable portion of the work. The book should be in the hands of all who take an interest in the progress of etherization."

Cod-Liver Oil.—Dr. Williams, speaking of this article, in the London Journal of Medicine, says—"The livers should be used as soon as possible after the death of the fish, every hour deteriorating the quality of the oil. The pile, plump livers should be preferred; those which are flabby and dark in color should be rejected as unhealthy. The livers, after being quickly pounded into a pulp, should be mixed with water (or exposed in a vessel, without water, to the heat of boiling water or of steam) of the temperature of about 120°, then filtered; and after standing long enough, the oil is to be decanted from the filtered liquor, cooled to the temperature of 50°, and again filtered. The whole process is to be accomplished with as little delay as possible, and in closed vessels, to prevent the air from giving to the oil the slightest degree of rancidity. For the same reason, the vessels in which the oil is preserved, should be full, well corked, and kept in a cool place." Dose, a teaspoonful, gradually increased (if the stomach bear it) to a tablespoonful, in some pleasant liquid, three times a day.